UNITED STATES POSTAL SERVICE

First-Class Mail Postage & Fees Paid Permit No. G-10

102595-02-M-1540

Sender: Please print your name, address, and ZIP+4 in this box

Azulay Seidenlaw Group 205 N. Michigan Ave 40th Floor Chicago, 12 60601

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X
1. Article Addressed to: USAHY GENERAL Michael B. Mukasey 950 Pennsy Ivania tve, NW	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Washington, D.C. 20530	3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7001 0360 0000 4310 3253	
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540

Domestic Return Receipt